Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF MICHIGAN	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
Your full name Write the name that is on your government-issued picture identification (for Cynthia First name			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for		r full name		
	Writ	e the name that is on	Cynthia	
	pictu		First name	First name
	licer	nse or passport).	Middle name	Middle name
	Brin	g your picture	Wade	
		itification to your eting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number N)	xxx-xx-3598	

Debtor 1	Cynthia Wade	Case number (if known)	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s) EINs
		EINS	EIINS
5.	Where you live	27777 Dequindre Rd. Apt 402	If Debtor 2 lives at a different address:
		Madison Heights, MI 48071 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Oakland	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

page 2

Deb	otor 1 Cynthia Wade					Case numbe	r (if known)	
Par	t 2: Tell the Court About	our Bankrı	uptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are			orief description of each, see go to the top of page 1 and			42(b) for Individuals Filing for Bankru	ptcy
	choosing to file under	Chapte	r 7					
		☐ Chapte	r 11					
		☐ Chapte	r 12					
		☐ Chapte	r 13					
8.	How you will pay the fee	abou orde	it how yo r. If your	ou may pay. Typically, if you a	are paying the fe	e yourself, you m	rk's office in your local court for more ay pay with cash, cashier's check, or ney may pay with a credit card or che	money
						option, sign and a	ttach the Application for Individuals to) Pay
			•	e in Installments (Official For at my fee be waived (You ma	,	ntion only if you a	are filing for Chapter 7. By law, a judge	e mav
		but is appli	s not req	uired to, waive your fee, and ur family size and you are un	may do so only i able to pay the fe	if your income is ee in installments	less than 150% of the official poverty). If you choose this option, you must	line that
		tne A	Applicatio	on to Have the Chapter / Filli	ng Fee walved (Official Form 103	B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District		When		Case number	
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When		Case number, if known	
11.	Do you rent your	■ No.	Go to I	ine 12.				
	residence?	☐ Yes.	Has yo	our landlord obtained an evict	ion judgment ag	ainst you and do	you want to stay in your residence?	
				No. Go to line 12.	0	-	· •	
				Yes. Fill out Initial Statemer	nt About an Evicti	ion Judgment Ag	ainst You (Form 101A) and file it with	this
				bankruptcy petition.		5 5		

Jer	Cynthia wade				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own	as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Sta	te & ZIP Code
	it to this petition.		Checi	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
⊃ar	t 4: Report if You Own or	Have Any	/ Hazardo	us Property or An	y Property That Needs Immediate Attention
	Do you own or have any	■ No.	<u> </u>		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Cynthia Wade

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Cynthia Wade			Case number (if known)
Par	t 6: Answer These Questi	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are defined al, family, or household purpose."	d in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ness debts? Business debts are debts that nent or through the operation of the busine	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe	that are not consumer debts or business of	debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	■ Yes.	are paid that funds will be available.	you estimate that after any exempt propert able to distribute to unsecured creditors?	y is excluded and administrative expenses
	be available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Par	7: Sign Below				
For	you	I have exa	amined this petition, and I declar	e under penalty of perjury that the informa	tion provided is true and correct.
				am aware that I may proceed, if eligible, uref available under each chapter, and I choo	
				pay or agree to pay someone who is not a otice required by 11 U.S.C. § 342(b).	n attorney to help me fill out this
		I request	relief in accordance with the cha	pter of title 11, United States Code, specifi	ed in this petition.
		bankrupto and 3571	cy case can result in fines up to \$	ncealing property, or obtaining money or p 250,000, or imprisonment for up to 20 yea	property by fraud in connection with a urs, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Cynthia		Signature of Debtor 2	
		Executed	on May 16, 2017 MM / DD / YYYY	Executed on MM / I	DD / YYYY

Debtor 1 Cynthia Wade		Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, United	States Code, and have	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect.		, , , , , , , , , , , , , , , , , , , ,
	/s/ Terrance A. Hiller	Date	May 16, 2017
	Signature of Attorney for Debtor		MM / DD / YYYY
	Terrance A. Hiller		
	Printed name		
	Jaafar Law Group PLLC		
	Firm name		
	23400 Michigan Ave		
	Suite 110A		
	Dearborn, MI 48124		
	Number, Street, City, State & ZIP Code		

Email address

Contact phone **888-324-7629**

P55699 Bar number & State

Fill	in this information to identify your case	e:			
	otor 1 Cynthia Wade				
Det	First Name	Middle Name	Last Name		
1	First Name	Middle Name	Last Name		
Uni	ed States Bankruptcy Court for the: E.	ASTERN DISTRICT OF	F MICHIGAN		
Cas	e number			- 051	off delacta and
(II KI	owii)			_	c if this is an ded filing
Of	ficial Form 106Sum				
			d Certain Statistical Information		12/15
info	mation. Fill out all of your schedules fi original forms, you must fill out a new	irst; then complete the	are filing together, both are equally responsible for e information on this form. If you are filing amend the box at the top of this page.		
				Your a	ssats
					of what you own
1.	Schedule A/B: Property (Official Form 1a, Copy line 55, Total real estate, from	106A/B) Schedule A/B		\$	0.00
				\$	3,626.00
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	3,626.00
Par	2: Summarize Your Liabilities				
ı aı	Gammanizo Tour Ziasiniloo			Your li	abilities
					t you owe
2.	Schedule D: Creditors Who Have Claim 2a. Copy the total you listed in Column A		(Official Form 106D) he bottom of the last page of Part 1 of <i>Schedule D</i>	\$	0.00
3.	Schedule E/F: Creditors Who Have Uns 3a. Copy the total claims from Part 1 (p	ecured Claims (Official riority unsecured claims	Form 106E/F) s) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (n	onpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	30,176.00
			Your total liabilities	\$	30,176.00
Par	3: Summarize Your Income and Ex	penses			
4.	Schedule I: Your Income (Official Form Copy your combined monthly income from	,	<i>I</i>	\$	1,816.90
5.	Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2			\$	1,640.20
Par	4: Answer These Questions for Add	ministrative and Statis	stical Records		
6.	Are you filing for bankruptcy under C ☐ No. You have nothing to report on the content of the c	• • •	neck this box and submit this form to the court with yo	ur other scl	hedules.
7.	■ Yes What kind of debt do you have?				
			lebts are those "incurred by an individual primarily for	a personal	, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Debtor 1	Cynthia Wade	
Debtor 2	First Name Middle Name Last Name	
(Spouse, if filing)	First Name Middle Name Last Name	
United States B	Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	
Case number		☐ Check if this is an
		amended filing
Official E	orm 106 \ /B	
	orm 106A/B	
	Ile A/B: Property , separately list and describe items. List an asset only once. If an asset fits in more than one category, list the	12/15
think it fits best. information. If mo Answer every que	Be as complete and accurate as possible. If two married people are filing together, both are equally responsib ore space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name	le for supplying correct
1. Do you own oi	r have any legal or equitable interest in any residence, building, land, or similar property?	
■ No. Go to P	rant 2.	
_	e is the property?	
Do you own, le someone else d	rase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Do you own, le someone else d	ase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include	e any vehicles you own that
Do you own, le someone else d 3. Cars, vans, t No Yes 4. Watercraft, a	ease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include Irives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.	e any vehicles you own that
Do you own, le someone else d 3. Cars, vans, t No Yes 4. Watercraft, a	pase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles	e any vehicles you own that
Do you own, lesomeone else d 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Bo	pase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles	e any vehicles you own that
Do you own, le someone else d 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Bo	pase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles	e any vehicles you own that
Do you own, lesomeone else d 3. Cars, vans, f No Yes 4. Watercraft, a Examples: Bo No Yes	pase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles	e any vehicles you own that
Do you own, le someone else d 3. Cars, vans, 1 No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the dol pages you le	pase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Itrucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories pats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories llar value of the portion you own for all of your entries from Part 2, including any entries for	
Do you own, le someone else d 3. Cars, vans, 1 No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the dol pages you l	Passe, or have legal or equitable interest in any vehicles, whether they are registered or not? Include trives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. Itrucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories pats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories allar value of the portion you own for all of your entries from Part 2, including any entries for have attached for Part 2. Write that number here	
Do you own, le someone else d 3. Cars, vans, f No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the dol pages you l Part 3: Describ Do you own of 6. Household of Examples: No No	lase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include rives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories allar value of the portion you own for all of your entries from Part 2, including any entries for have attached for Part 2. Write that number here	\$0.00 Current value of the portion you own? Do not deduct secured
Do you own, le someone else d 3. Cars, vans, t No Yes 4. Watercraft, a Examples: Bo No Yes 5 Add the dol pages you l Part 3: Describ Do you own on 6. Household of Examples: No	lase, or have legal or equitable interest in any vehicles, whether they are registered or not? Include rives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. trucks, tractors, sport utility vehicles, motorcycles aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories bats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories allar value of the portion you own for all of your entries from Part 2, including any entries for have attached for Part 2. Write that number here	\$0.00 Current value of the portion you own? Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	Cynthia Wad	le Case number	(if known)
	Yes.	Describe		
			2 tvs, 1 laptop computer, 1 cell phone	\$500.00
	Example ■ No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stans, memorabilia, collectibles	amp, coin, or baseball card collections;
9.		ent for sports ares: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
10.	Firearn Examp ■ No		s, shotguns, ammunition, and related equipment	
11.	Clothe: Examp	s	othes, furs, leather coats, designer wear, shoes, accessories	
			Ordinary everyday clothing and shoes	\$1,700.00
	■ No □ Yes. Non-fa Examp		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches birds, horses	s, gems, gold, silver
	■ No □ Yes.	Describe		
14.	■ No	her personal and	d household items you did not already list, including any health aids you did rormation	ot list
15			of all of your entries from Part 3, including any entries for pages you have atta number here	\$2,800.00
		scribe Your Finand vn or have any le	cial Assets egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		nave in your wallet, in your home, in a safe deposit box, and on hand when you file y	our petition
	- 100		Cash	\$100.00

Official Form 106A/B Schedule A/B: Property page 2

D	ebtor 1	Cynthia Wade	Case number (if known)	
17.	Exam		accounts; certificates of deposit; shares in credit unions, brokerage houses, ar unts with the same institution, list each.	nd other similar
	□ No ■ Yes		Institution name:	
		17.1. Checking	Christian Financial Credit Union	\$41.00
18.	Exam	i, mutual funds, or publicly traded stocker ples: Bond funds, investment accounts with		
	■ No □ Yes	Institution or issu	uer name:	
19.	. Non-pı		orporated and unincorporated businesses, including an interest in an LL	.C, partnership, and
	_	Give specific information about them Name of entity:	% of ownership:	
20.	Negot	iable instruments include personal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them.	
		Give specific information about them Issuer name:		
21.		ment or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k	k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
		List each account separately. Type of account:	Institution name:	
22.	Your s		e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications companies, or other.	ners
	■ No □ Yes.		Institution name or individual:	
23.	. Annuit No	ties (A contract for a periodic payment of m	noney to you, either for life or for a number of years)	
	☐ Yes	Issuer name and description	n.	
24.		ts in an education IRA, in an account in C. §§ 530(b)(1), 529A(b), and 529(b)(1).	a qualified ABLE program, or under a qualified state tuition program.	
	☐ Yes	Institution name and descrip	ption. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No		y (other than anything listed in line 1), and rights or powers exercisable	for your benefit
	☐ Yes.	Give specific information about them		
26.	Examp ■ No	•	s, and other intellectual property sceeds from royalties and licensing agreements	
	⊔ Yes.	Give specific information about them		
27.	Examµ ■ No	ses, franchises, and other general intang ples: Building permits, exclusive licenses, of Give specific information about them	gibles cooperative association holdings, liquor licenses, professional licenses	
M		property owed to you?	Cur	rent value of the

Official Form 106A/B Schedule A/B: Property page 3

portion you own?

Debtor 1	Cynthia Wade	Case number (if known)	
			Do not deduct secured claims or exemptions.
■ No	efunds owed to you Give specific information about them, including whether you	already filed the returns and the tax years	
■ No	y support oples: Past due or lump sum alimony, spousal support, child su . Give specific information	upport, maintenance, divorce settlement, property so	ettlement
Exam ■ No	amounts someone owes you pples: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else . Give specific information	benefits, sick pay, vacation pay, workers' compens	ation, Social Security
<i>Exam</i> □ No	sts in insurance policies sples: Health, disability, or life insurance; health savings accou		е
■ Yes.	Company name:	e. Beneficiary:	Surrender or refund value:
	AARP New York Life	son	Unknown
	Metlife	Cynthia Wade	\$685.00
If you some No ☐ Yes.	nterest in property that is due you from someone who has are the beneficiary of a living trust, expect proceeds from a lift one has died. Give specific information s against third parties, whether or not you have filed a law apples: Accidents, employment disputes, insurance claims, or right.	e insurance policy, or are currently entitled to receive the second seco	ve property because
	. Describe each claim		
■ No	contingent and unliquidated claims of every nature, inclu Describe each claim	ding counterclaims of the debtor and rights to s	set off claims
35. Any fi	nancial assets you did not already list		
■ No □ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 4, includin Part 4. Write that number here		\$826.00
Part 5: De	escribe Any Business-Related Property You Own or Have an Inter	est In. List any real estate in Part 1.	
	own or have any legal or equitable interest in any business-relate to to Part 6.	ed property?	

Official Form 106A/B Schedule A/B: Property page 4

 \square Yes. Go to line 38.

Debtor	1 Cynthia Wade		Case number (if known)	
	Describe Any Farm- and Commercial Fishing-Related Property You O If you own or have an interest in farmland, list it in Part 1.	wn or Have an Interes	st In.	
46. Do y	you own or have any legal or equitable interest in any farm- o	r commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You D	Did Not List Above		
	you have other property of any kind you did not already list? amples: Season tickets, country club membership			
■ No	0			
□ Ye	es. Give specific information			
	dd the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa	art 1: Total real estate, line 2			\$0.00
56. Pa	art 2: Total vehicles, line 5	\$0.00		
57. Pa	art 3: Total personal and household items, line 15	\$2,800.00		
58. Pa	art 4: Total financial assets, line 36	\$826.00		
59. Pa	art 5: Total business-related property, line 45	\$0.00		
60. Pa	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	ert 7: Total other property not listed, line 54 +	\$0.00		
62. To	otal personal property. Add lines 56 through 61	\$3,626.00	Copy personal property total	\$3,626.00
63. To	otal of all property on Schedule A/B. Add line 55 + line 62			\$3,626.00

Eil	l in this inform	ation to identify your	caso:		Ī	
	ebtor 1	Cynthia Wade	case.			
	DIOI 1	First Name	Middle Name	Last Name		
1 -	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
` `						
Un	ited States Ban	kruptcy Court for the:	EASTERN DISTRICT OF I	MICHIGAN		
1	se number					
(if k	nown)					Check if this is an amended filing
					_	amended lilling
0	fficial For	<u>m 106C</u>				
S	chedule	C: The Pro	perty You Cl	aim as Exempt		4/16
the nee	property you lis	ted on <i>Schedule A/B: F</i> I attach to this page as i	Property (Official Form 106A/E	ng together, both are equally responsible for as your source, list the property that you onal Page as necessary. On the top of any	ı claim as exe	empt. If more space is
spe any fun exe	ecific dollar am applicable sta ds—may be ur emption to a pa	ount as exempt. Alter atutory limit. Some exe alimited in dollar amou	natively, you may claim the emptions—such as those fo unt. However, if you claim a	he amount of the exemption you claim. full fair market value of the property be or health aids, rights to receive certain be an exemption of 100% of fair market value or ty is determined to exceed that amoun	eing exempte benefits, and ue under a la	ed up to the amount of tax-exempt retirement w that limits the
Pa	rt 1: Identify	the Property You Cla	im as Exempt			
1.	Which set of	exemptions are you cl	laiming? Check one only, ev	en if your spouse is filing with you.		
	☐ You are cla	iming state and federal	nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)		
	■ You are cla	iming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Sched	ule A/B that you claim as ex	kempt, fill in the information below.		
		on of the property and line hat lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific lav	vs that allow exemption

Copy the value from Schedule A/B Check only one box for each exemption. 1 love seat sofa, 1 recliner chair, 4 11 U.S.C. § 522(d)(3) \$600.00 \$600.00 piece bedroom set, microwave oven, 2 lamps, 3 piece livingroom set 100% of fair market value, up to Line from Schedule A/B: 6.1 any applicable statutory limit 2 tvs, 1 laptop computer, 1 cell phone 11 U.S.C. § 522(d)(3) \$500.00 \$500.00 Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Ordinary everyday clothing and 11 U.S.C. § 522(d)(3) \$1,700.00 \$1,700.00 Line from Schedule A/B: 11.1 100% of fair market value, up to

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$100.00

\$41.00

Cash

Union

Line from Schedule A/B: 16.1

Line from Schedule A/B: 17.1

\$100.00

\$41.00

Checking: Christian Financial Credit

11 U.S.C. § 522(d)(5)

11 U.S.C. § 522(d)(5)

		scription of the property and line on le A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		New York Life ciary: son	Unknown		\$1.00	11 U.S.C. § 522(d)(5)
		m Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	Metlife	e ciary: Cynthia Wade	\$685.00		\$685.00	11 U.S.C. § 522(d)(5)
		m Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	Metlife	e ciary: Cynthia Wade	\$685.00		\$0.00	11 U.S.C. § 522(d)(7)
		m Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
3.	•	u claiming a homestead exemption t to adjustment on 4/01/19 and every			ed on or after the date of adjustmer	nt.)
	☐ Ye	es. Did you acquire the property cove	red by the exemption wi	thin 1	215 days before you filed this case	?
		No				
		Yes				

Fill in this infor	mation to identify your	case:		
Debtor 1	Cynthia Wade			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF MICHIGAN	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - \square Yes. Fill in all of the information below.

Fill in t	this inform	ation to identify your c	ase:					
Debtor	· 1	Cynthia Wade						
		First Name	Middle Na	ime	Last Name			
Debtor		First Name	Middle Na		Loot Name			
(Spouse	ii, iiiing)	First Name	Middle Na	ime	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN D	ISTRICT OF MI	CHIGAN			
Case n	number							
(if known)			-				Check if this is an
								amended filing
Offici	al Form	106E/F						
		F: Creditors W	ho Have	Unsecure	d Claims			12/15
						Part 2 for creditors with NON	PRIORITY c	
Schedul Schedul left. Atta name an	le G: Executor le D: Creditor ach the Conti ad case num	ory Contracts and Unexpirs Who Have Claims Sectionation Page to this page ber (if known).	red Leases (Of ired by Propert e. If you have n	ficial Form 106G) y. If more space i o information to	. Do not include is needed, copy t	ontracts on Schedule A/B: P any creditors with partially s the Part you need, fill it out, i do not file that Part. On the to	ecured clair number the	ns that are listed in entries in the boxes on the
Part 1:		of Your PRIORITY Un						
	-	s have priority unsecured	i ciaims agains	t you?				
	No. Go to Pa	rt 2.						
Part 2:	Yes.	of Your NONPRIORIT	V Uncoured	Claims				
	-	s have nonpriority unsec	_	-				
		e nothing to report in this pa	art. Submit this f	orm to the court wi	th your other sche	edules.		
	Yes.							
uns	secured claim n one credito	, list the creditor separately	for each claim.	For each claim list	ed, identify what t	holds each claim. If a credite type of claim it is. Do not list cla three nonpriority unsecured cl	ims already	included in Part 1. If more
								Total claim
4.1	Barclays	Bank Delaware		Last 4 digits of a	ccount number	9900		\$7,462.00
	Nonpriority	Creditor's Name				0		
	Po Box 8	3803		When was the de	ebt incurred?	Opened 11/12 Last A 8/01/16	Active	
		ton, DE 19899						
		eet City State Zlp Code red the debt? Check one.		As of the date yo	u file, the claim i	s: Check all that apply		
	Debtor 1	•		☐ Contingent				
	Debtor 2	•		☐ Unliquidated				
		and Debtor 2 only		☐ Disputed Type of NONPRICE	OPITY unequired	l claim:		
	_	one of the debtors and and		☐ Student loans	JRITT unsecured	i Cidiiii.		
	☐ Check if debt	f this claim is for a comn	nunity		sing out of a sena	ration agreement or divorce th	at vou did no	nt .
		subject to offset?		report as priority c		.a.s.r agreement of arrorde th	a. you did He	•
	■ No			Debts to pensi	on or profit-sharin	g plans, and other similar debt	S	
	☐ Yes			Other. Specify	Credit Card	<u> </u>		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Notify Creditor's Name 15000 Capital One Dr Richmond, VA 23238 Number Street City State Zip Code Who incurred the debt? Chock one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and senther Check if this claim is for a community debtor 1 sent Debtor 1 one? Norporative Creditor's Name Co Carolyn R. Cohen, Esq. A230 Orthard Lake, Mil 43223 Number City Contingent Debtor 1 one) Debtor 1 and Debtor 2 only Debtor 1 one Norporative Creditor's Name Co Carolyn R. Cohen, Esq. A230 Orthard Lake Rd. Orchard Lake, Mil 43220 Number City City State 2 De Code Who incurred the debt? Chock one. Debtor 1 only Debtor 1 only Creditor's Name Co Contingent C	Debte	or 1 Cynthia Wade		Case number (if know)	
15000 Capital One Dr Richmond, VA 23238 When was the debt incurred? As of the date you file, the claim is: Check all that apply	4.2		Last 4 digits of account number	5946	\$923.00
Number Steet City State Zip Code As of the date you flie, the claim is: Check all that apply Codingent Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 5 only Debtor 4 and Debtor 5 only Debtor 6 only		15000 Capital One Dr	When was the debt incurred?		
Debtor 2 only		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Debtor 1 and Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Debtor 5 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only D		■ Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community Check if this claim is for a community Check if this claim is for a community debt Check if this claim is for a community Check if this claim is check if the claim is check if this claim is check if the claim is check if this claim is check if the claim is check if this claim is check if this claim is check if thi		Debtor 2 only	☐ Unliquidated		
Check if this claim is for a community debt Chigations arising out of a separation agreement or divorce that you did not report as priority claims Cartlyle PO, LLC d/h/a Cartlyle Tower Cotarolyn R. Cohen, Esq. 4230 Orchard Lake Rd. Orchard Lake Rd. Orchard Lake Rd. Orchard Lake, MI 48323 Cartlyle PO and the debt? Check one. Check if this claim is for a community debt Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check if this claim is for a community debt Check one. Check of the debtor of and pebtor 2 only Cotaron of the debtor of th		☐ Debtor 1 and Debtor 2 only	☐ Disputed		
Continuence		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Is the claim subject to offset? No		☐ Check if this claim is for a community	☐ Student loans		
Carlyle PO, LLC d/b/a Carlyle Tower Apts Last 4 digits of account number \$2,533.00				aration agreement or divorce that you did not	
Carlyle PO, LLC d/b/a Carlyle Tower Apts Last 4 digits of account number \$2,533.00		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Apts Last 4 digits of account number \$2,533.00		☐ Yes	Other. Specify Credit Card	<u> </u>	
C/O Carolyn R. Cohen, Esq. 4230 Orchard Lake Rd. Orchard Lake, MI 48323 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 4 offset? Debtor 5 offset? Debtor 5 offset? Debtor 6 offset? Debtor 6 offset? Debtor 7 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Street City State Zip Code Who incurred the debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Dobligations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 1 on please of the debtors and another report as priority claims Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	4.3	Apts	Last 4 digits of account number		\$2,533.00
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		c/o Carolyn R. Cohen, Esq. 4230 Orchard Lake Rd.	When was the debt incurred?	2016	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Opened 09/15 Last Active 12/27/16 As of the date you file, the claim is: Check all that apply □ Debtor 1 only □ Contingent □ Debtor 2 only □ Disputed □ Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts No, Debts to pension or profit-sharing plans, and other similar debts Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts PO Box 6497 Sioux Falls, SD 57117 As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts		Debtor 1 only	☐ Contingent		
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts Debts of a count number Student loans Debts of a count number Student loans Debts of a count number Debts of a coun		Debtor 2 only	☐ Unliquidated		
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Obligations arising out of a separation agreement or divorce that you did not report as priority claims No		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Is the claim subject to offset? No		☐ Check if this claim is for a community	☐ Student loans		
Cbna Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Sa,083.00 \$3,083.00 \$3,083.00 \$3,083.00 \$3,083.00 \$3,083.00 \$3,083.00 \$3,083.00 \$4 So fthe daccount number opened 09/15 Last Active 12/27/16 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply			report as priority claims		
Cbna Last 4 digits of account number 9002 \$3,083.00		No	Debts to pension or profit-sharing	g plans, and other similar debts	
Nonpriority Creditor's Name Po Box 6497 Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No Depend 09/15 Last Active 12/27/16 As of the date you file, the claim is: Check all that apply Check all that apply Vhen was the debt incurred? Depend 09/15 Last Active 12/27/16 As of the date you file, the claim is: Check all that apply Vhen was the debt incurred? As of the date you file, the claim is: Check all that apply Deptor 1 only Disputed Type of NonPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts		Yes	Other. Specify back rent		
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Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		Po Box 6497	When was the debt incurred?		
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
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□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		_			
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts					
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts				d claim:	
debt Is the claim subject to offset? In No Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		_	☐ Student loans		
		debt		aration agreement or divorce that you did not	
☐ Yes ☐ Other. Specify Credit Card		■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
		☐ Yes	■ Other. Specify Credit Card	I	

1 Cynthia Wade		Case number (if know)	
Christian Financial Cr Nonpriority Creditor's Name	Last 4 digits of account number	3077	\$967.00
18441 Utica Rd Roseville, MI 48066	When was the debt incurred?	Opened 02/16 Last Active 3/15/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Unsecured		
CT Owner A-1 LLC Nonpriority Creditor's Name	Last 4 digits of account number		\$2,520.00
23300 Providence Dr, Suite 101 Southfield, MI 48075	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify back rent	_	
Frd Motor Cr	Last 4 digits of account number	6023	\$7,446.00
Nonpriority Creditor's Name			
Pob 542000 Omaha, NE 68154	When was the debt incurred?	Opened 04/16 Last Active 1/13/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
_	Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another			
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
☐ Check if this claim is for a community	_	·	

			
I C System Inc Nonpriority Creditor's Name	Last 4 digits of account number	9553	\$114.00
Po Box 64378	When was the debt incurred?	Opened 11/16	
Saint Paul, MN 55164			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	По и		
	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
_	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
At least one of the debtors and another	Student loans	u Gain	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other Specify Collection		
Syncb/amazon	Last 4 digits of account number	6956	\$3,745.00
Nonpriority Creditor's Name	_	One and OMOME Least Action	
Po Box 965015 Orlando, FL 32896	When was the debt incurred?	Opened 2/10/15 Last Active 1/10/17	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Syncb/care Credit	Last 4 digits of account number	5626	\$894.00
Nonpriority Creditor's Name	_	0 - 140/45 1 - 14 1 - 1	
C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 10/15 Last Active 11/10/16	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing		
Yes	■ Other. Specify Charge Acc	count	

Td Bank Usa/targetcred	Last 4 digits of account number	0539	\$489.0		
Nonpriority Creditor's Name Po Box 673 Minneapolis, MN 55440	When was the debt incurred?	Opened 07/15 Last Active 4/06/17			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharir	ng plans, and other similar debts			
Yes	■ Other Specify Credit Card				
List Others to Be Notified About a Del	ot That You Already Listed				
ring to collect from you for a debt you owe to so	meone else, list the original creditor ir t you listed in Parts 1 or 2, list the add	you already listed in Parts 1 or 2. For example, if a I Parts 1 or 2, then list the collection agency here. Itional creditors here. If you do not have additional	Similarly, if yo		
	On which entry in Part 1 or Part 2 did you	list the original creditor?			
	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
S.Telegraph Rd. Suite 200 mfield Hills, MI 48302		Part 2: Creditors with Nonpriority Unsecured Claims			
	Last 4 digits of account number				

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 30,176.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 30,176.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Cynthia Wade			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN	
Case number _				☐ Check if this is an
,				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Madison Tower Apartments
27777 Dequindre
Madison Heights, MI 48071

State what the contract or lease is for
residential lease

Debtor 1	Cynthia Wade				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT (OF MICHIGAN		
Case numb (if known)	er				☐ Check if this is an amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
Arizona No. (in the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	uerto Rico, Texas, Wash		y states and territories include
in line : Form 1 out Co	2 again as a codebtor only i	f that person is a guarar	ntor or cosigner. Make	sure you have listed th 06G). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi editor to whom you owe the debt
N	ame, Number, Street, City, State and Zl	P Code		Check all schedule	•
3.1 _N	lame			☐ Schedule D, line ☐ Schedule E/F, li ☐ Schedule G, line	ine
	lumber Street City	State	ZIP Code		
3.2 _N	lame			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ine
	lumber Street City	State	ZIP Code		

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Page 1 of 1
Best Case Bankruptcy

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Fill	in this information to i	dentify your ca	ase:								
Del	btor 1	Cynthia Wad	de			_					
	btor 2					_					
Uni	ited States Bankruptcy	Court for the	: EASTERN DISTRICT	OF MICHIGAN		_					
	se number 						□ Ar		ed filing ent show	ring postpetition	
0	fficial Form 1	<u> 1061</u>					M	M / DD/ Y	YYY		
S	chedule I: Y	our Inc	ome								12/15
sup spo atta Par	plying correct informuse. If you are separch a separate sheet to the describe E	nation. If you ated and you to this form.	sible. If two married peo are married and not filin ir spouse is not filing wi On the top of any addition	ng jointly, and your s th you, do not inclu	spouse i de inforr	s liv natio	ing with yon about	ou, incl your spo	ude info ouse. If r	rmation about more space is	your needed,
1.	Fill in your employ information.	ment		Debtor 1				Debtor 2	or non-	-filing spouse	
	If you have more that attach a separate pa		Employment status	☐ Employed				☐ Emple	,		
	information about ac employers.	dditional	Occupation	■ Not employed				☐ Not e	mpioyea		
	Include part-time, se self-employed work.		Employer's name								
	Occupation may inc or homemaker, if it a		Employer's address								
			How long employed the	here?				_			
Pai	rt 2: Give Detai	Is About Mor	nthly Income								
	imate monthly incomuse unless you are se		ate you file this form. If y	you have nothing to re	eport for	any l	ine, write	\$0 in the	space. I	nclude your no	n-filing
	ou or your non-filing sp e space, attach a sepa		ore than one employer, co	ombine the information	n for all e	mplo	oyers for t	hat perso	n on the	lines below. If	you need
							For Deb	tor 1		ebtor 2 or iling spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$		0.00	\$	N/A	
3.	Estimate and list m	nonthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Inc	come. Add lir	ne 2 + line 3.		4.	\$		0.00	\$_	N/A	

Case number (if known)

					For	Debtor 1		Debtor 2 or -filing spouse
	Сору	line 4 here		4.	\$	0.00	\$	N/A
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Socia	I Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions		5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions f	or retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of		5d.	\$	0.00	\$	N/A
	5e.	Insurance		5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligat	tions	5f.	\$	0.00	\$	N/A
	5g.	Union dues		5g.	\$	0.00	\$_	N/A
	5h.	Other deductions. Specify	<i>r</i> :	5h.+	\$		· \$ [—]	N/A
6.	Add	the payroll deductions. Ac	dd lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Calc	ulate total monthly take-ho	me pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List a 8a.	profession, or farm Attach a statement for each	received: roperty and from operating a business, n property and business showing gross essary business expenses, and the total	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends		8b.	\$	0.00	\$	N/A
	8c.	regularly receive	s that you, a non-filing spouse, or a deper upport, child support, maintenance, divorce sttlement.	ndent 8c.	\$	0.00	\$	N/A
	8d.	Unemployment compens	ation	8d.	\$	0.00	\$	N/A
	8e.	Social Security		8e.	\$	1,816.90	\$	N/A
	8f.	Include cash assistance and that you receive, such as for Nutrition Assistance Programs Specify:		al 8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement inc		8g.	\$	0.00	\$_	N/A
	8h.	Other monthly income. S	pecify:	8h.+	\$	0.00	٠\$_	N/A
9.	Add	all other income. Add lines	8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,816.90	\$_	N/A
10.	Calc	ulate monthly income. Add	d line 7 + line 9.	10. \$	1	,816.90 + \$		N/A = \$ 1,816.90
			tor 1 and Debtor 2 or non-filing spouse.	-		,		
11.	Include other	de contributions from an unn friends or relatives. of include any amounts alrea	tions to the expenses that you list in Schenarried partner, members of your household ady included in lines 2-10 or amounts that are	, your depend				Schedule J. 11. +\$ 0.00
12.		that amount on the Summa	umn of line 10 to the amount in line 11. The sy of Schedules and Statistical Summary of					12. \$1,816.90
13.	Do y	ou expect an increase or d	ecrease within the year after you file this	form?				Combined monthly income
		No.	-					
		Yes. Explain:						

Fill in	this information to	identify yo	our case:					
Debto	or 1 Cyn	thia Wad	le			Check	c if this is:	
5						_	An amended filing	
Debto (Spou	or 2 use, if filing)							ving postpetition chapte the following date:
United	d States Bankruptcy C	ourt for the	EASTE	RN DISTRICT OF MICHIG	iAN	<u> </u>	MM / DD / YYYY	
Case (If kno	number							
Off	ficial Form	106J						
Sc	hedule J:	Your I	Exper	ises				12
infor numl	mation. If more sp ber (if known). An 1: Describe Yo	ace is ne swer ever our House	eded, atta y questio	. If two married people ar ch another sheet to this n.				
	Is this a joint case							
	■ No. Go to line 2□ Yes. Does Deb		in a separ	ate household?				
	□ No □ Yes. De	btor 2 mus	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate Househ	old of Debto	or 2.	
2.	Do you have depe	endents?	■ No					
	Do not list Debtor 1 Debtor 2.	and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the							□ No
	dependents names	5.						□ Yes □ No
								☐ Yes
								□No
								☐ Yes
								□ No
	D	. :						☐ Yes
	Do your expenses expenses of peop		han	No				
	yourself and your			Yes				
Part 2	2: Estimate Yo	ur Ongoi	na Monthi	v Expenses				
expe	nate your expense	es as of yo	our bankr	uptcy filing date unless y y is filed. If this is a supp				
he v	ide expenses paid value of such assistical Form 106I.)	for with r stance and	non-cash d have ind	government assistance i luded it on <i>Schedule I:</i>)	f you know 'our Income		Your expe	enses
				ses for your residence. I	nclude first mortgage	4 \$		622.00
	payments and any		e ground o	or lot.		4. \$		022.00
	If not included in							
	4a. Real estate t			!- :		4a. \$		0.00
	 Property, ho Home maint 			's insurance ipkeep expenses		4b. \$ 4c. \$		0.00
	4d. Homeowner					4d. \$		0.00

Official Form 106J Schedule J: Your Expenses

Fill in this inform	mation to identify your	case:			
Debtor 1	Cynthia Wade				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Case number _ (if known)					☐ Check if this is an amended filing
Official Forn Declarat	•	ın Individual	Debtor's Sc	hedules	12/15
If two married pe	eople are filing togethe	r, both are equally respor	nsible for supplying corre	ect information.	
obtaining money years, or both. 1		n connection with a bank			ement, concealing property, or 00, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	inkruptcy forms?	
■ No					
☐ Yes. N	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	alty of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	with this declaration	on and
X /s/ Cyn	nthia Wade		X		
Cynthi	ia Wade re of Debtor 1		Signature of D	Debtor 2	
Date _	May 16, 2017		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Fill in 1	this informa	ation to identify you	r case:				
Debtor				ł			
Debioi	1	Cynthia Wade First Name	Middle Name		Last Name		
Debtor	_						
(Spouse	it, tiling)	First Name	Middle Name		Last Name		
United	States Bank	kruptcy Court for the:	EASTERN DISTRICT C	OF MIC	HIGAN		
Case n						_	Check if this is an amended filing
State Be as c	omplete an	of Financial	attach a separate sheet t	e are fil	ling together, both are	ankruptcy equally responsible for su y additional pages, write yo	
Part 1:	Give De	tails About Your Ma	arital Status and Where Yo	ou Live	ed Before		
1. WI	hat is your	current marital statu	ıs?				
п	Married						
	Not marri	ed					
2. Du	iring the las	st 3 years, have you	lived anywhere other tha	n wher	e you live now?		
	No						
	Yes. List	all of the places you l	ived in the last 3 years. Do	not inc	lude where you live now	<i>'</i> .	
D	ebtor 1 Pric	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	3300 Provi outhfield,	idence Dr. Apt. 90 MI 48076	From-To: Dec 2013 - D 2017	Эес	☐ Same as Debtor		☐ Same as Debtor 1 From-To:
	and territorie. No	s include Arizona, Ca		Nevada,	, New Mexico, Puerto R	ity property state or territorico, Texas, Washington and V	
Part 2	Explain	the Sources of You	r Income				
Fill	I in the total	amount of income yo	nployment or from operat u received from all jobs and have income that you rece	d all bus	sinesses, including part-		endar years?
■	No Yes. Fill i	n the details.					
			Debtor 1			Debtor 2	
			Sources of income	G	ross income	Sources of income	Gross income
			Check all that apply.	(b	efore deductions and	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	nclude ind nd other	come regard public benef	less of wheth it payments;	e during this year or the that income is taxab pensions; rental income se and you have income	le. Examples e; interest; div	of other income are a ridends; money collect	ted from lawsuits;	royalties; and	
L	ist each	source and t	he gross inco	ome from each source s	eparately. Do	not include income t	nat you listed in lin	e 4.	
	□ No								
	Yes.	Fill in the de	tails.						
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eac (bef	ss income from h source ore deductions and usions)	Sources of inco		Gross income (before deductions and exclusions)
		y 1 of currei filed for bar	nt year until kruptcy:	SSI Benefits		\$9,084.50			
		dar year: December	31, 2016)	SSI Benefits		\$21,802.80			
		dar year be December		SSI Benefits		\$21,802.80			
Part 3	3: List	t Certain Pa	yments You	Made Before You File	d for Bankru	ıptcy			
	re eithe ∃ No.	r Debtor 1's Neither Deindividual p During the No. Yes * Subject Debtor 1 c During the	or Debtor 2 ebtor 1 nor Debtor 2 ebtor 1 nor Debtor 2 nor Debtor 3 go days before Go to line 7 List below 6 paid that crunot include to adjustment or Debtor 2 o go days before Go to line 7 List below 6 include pay	's debts primarily con Debtor 2 has primarily personal, family, or ho ore you filed for bankrup ceach creditor to whom y editor. Do not include p payments to an attorne t on 4/01/19 and every	sumer debts consumer de usehold purpor tey, did you p ou paid a tota ayments for c y for this ban 3 years after t consumer de tey, did you p	ebts. Consumer debter ose." al of \$6,425* or more is domestic support obligher on the case of the cas	I of \$6,425* or more none or more pay ations, such as chor after the date of of \$600 or more?	e? ments and the ild support and fadjustment.	e total amount you d alimony. Also, do creditor. Do not
. A	re eithei] No.	r Debtor 1's Neither Deindividual p During the No. Yes * Subject Debtor 1 c During the	or Debtor 2 ebtor 1 nor D orimarily for a 90 days befor Go to line 7 List below e paid that cre not include to adjustment or Debtor 2 o 90 days befor Go to line 7 List below e include pay attorney for	each creditor to whom you got both have primarily and the you filed for bankrup or you filed for	sumer debts consumer de usehold purpo utcy, did you p ou paid a tota ayments for c y for this ban 3 years after t consumer de tcy, did you p	ebts. Consumer debter ose." al of \$6,425* or more is domestic support obligher on the case of the cas	I of \$6,425* or more none or more pay ations, such as chor after the date of of \$600 or more?	ments and the ild support and fadjustment. You paid that collso, do not inco	e total amount you d alimony. Also, do creditor. Do not

Case number (if known)

Debtor 1 Cynthia Wade

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any generation of 20% or	eral partners; partner r more of their voting	erships of which y g securities; and	you are a genera any managing a	al partner; corporations agent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer a	ny property on	account of a d	ebt that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Carlyle PO, LLC d/b/a Carlyle Tower Apts v. Cynthia Wade 17062661GC	breach of lease	43rd District Co 200 W. Thirteer Madison Heigh	n Mile Rd	■ Pending □ On appe □ Conclud	eal
	CT Owner A-1 LLC v. Cynthia Wade LT 164605	breach of lease	46th District Co 2600 Evergreer Southfield, MI	n Rd.	☐ Pending ☐ On appe	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garn	nished, attache	d, seized, or levied?
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Dat	e	Value of the
		Explain what happened	l			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No ☐ Yes. Fill in the details.	otcy, did any creditor, incl		nancial institutio	on, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Dat take	e action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		rty in the possessi	ion of an assigr	nee for the bend	efit of creditors, a

Case number (if known)

Official Form 107

Debtor 1 Cynthia Wade

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Debtor 1	Cynthia Wade	Case numb	er (if known)	
Part 5:	List Certain Gifts and Contribution	ons		
13. Wit l	hin 2 years before you filed for band	kruptcy, did you give any gifts with a total value of more	e than \$600 per person	?
	Yes. Fill in the details for each gift. fts with a total value of more than \$ r person	Describe the gifts	Dates you gave the gifts	Value
	rson to Whom You Gave the Gift an Idress:	nd		
14. Wit l	hin 2 years before you filed for banl No	kruptcy, did you give any gifts or contributions with a to	otal value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	r contribution.		
mo Ch	fts or contributions to charities that ore than \$600 parity's Name Idress (Number, Street, City, State and ZIP Co	·	Dates you contributed	Value
	yce Myer Ministries	money	May 2015 - May 2017	\$720.00
or g	hin 1 year before you filed for bankı gambling? No	ruptcy or since you filed for bankruptcy, did you lose ar	nything because of the	ft, fire, other disaster
15. With or g	hin 1 year before you filed for bankı gambling?	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	ft, fire, other disaster Value of property lost
15. With or g	hin 1 year before you filed for banking ambling? No Yes. Fill in the details. scribe the property you lost and withe loss occurred.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	Value of property
De hor	hin 1 year before you filed for banking ambling? No Yes. Fill in the details. Secribe the property you lost and we the loss occurred List Certain Payments or Transfer in 1 year before you filed for banking sulted about seeking bankruptcy oude any attorneys, bankruptcy petition. No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Pers Truptcy, did you or anyone else acting on your behalf pair preparing a bankruptcy petition? In preparers, or credit counseling agencies for services requi	Date of your loss y or transfer any properred in your bankruptcy.	Value of property lost erty to anyone you
15. With or g	hin 1 year before you filed for banking ambling? No Yes. Fill in the details. Secribe the property you lost and we the loss occurred List Certain Payments or Transfer hin 1 year before you filed for banking sulted about seeking bankruptcy oude any attorneys, bankruptcy petition.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Pers ruptcy, did you or anyone else acting on your behalf pair preparing a bankruptcy petition? In preparers, or credit counseling agencies for services require preparers. Description and value of any property transferred	Date of your loss	Value of property lost erty to anyone you Amount of
Part 7: 16. With conduction line line line line line line line lin	hin 1 year before you filed for banking ambling? No Yes. Fill in the details. Secribe the property you lost and we the loss occurred List Certain Payments or Transfer thin 1 year before you filed for banking is ulted about seeking bankruptcy oude any attorneys, bankruptcy petition. No Yes. Fill in the details. Serson Who Was Paid lidress and or website address.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Pers ruptcy, did you or anyone else acting on your behalf pair preparing a bankruptcy petition? In preparers, or credit counseling agencies for services require preparers. Description and value of any property transferred	Date of your loss y or transfer any propered in your bankruptcy. Date payment or transfer was	Value of property lost

Debtor 1 Cynthia Wade Case number (if known)

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors. Do not include any payment or transfer that you let No	or to make payments			or transfer any proper	ty to anyone who
	Yes. Fill in the details. Person Who Was Paid Address	Description and vatransferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.	siness or financial affa le as security (such as the	irs? ne granting of a s			
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre			any property or received or debts change	Date transfer was made
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.					f which you are a
	Name of trust	Description and va	alue of the prope	erty transferr	ed	Date Transfer was made
Par 20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association.	were any financial accoun	counts or instrur	ments held ir of deposit; sh		
		Last 4 digits of account number	Type of accour instrument	clo mo	te account was used, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed for	bankruptcy, any	r safe deposi	t box or other deposit	ory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had according Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 y	ear before yo	ou filed for bankruptc) ?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Cynthia Wade Case number (if known)

Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prop	erty y	ou borrowed from, are storing for	, or hold in trust		
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, grou	_	•			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.					
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		us wa	ste, hazardous substance, toxic s	ubstance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en the	ey occurred.			
24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	ole und	der or in violation of an environme	ental law?		
	■ No □ Yes. Fill in the details.	he details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)	and	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State : ZIP Code)	and	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	vironi	mental law? Include settlements a	nd orders.		
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business					
		-	anv of	the following connections to any	husiness?		
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership	,	······	,			
	☐ An officer, director, or managing executive of a corporation						
☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Deb	otor 1 Cynthia Wade	Ca	ase number (if known)
	■ No. None of the above applies. Go to	Part 12.	
	☐ Yes. Check all that apply above and fil	Il in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Namber, Street, Sky, State and En Soue)	Name of accountant or bookkeeper	Dates business existed
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	nyone about your business? Include all financial	
	■ No		
	Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	112: Sign Below		
are t		a false statement, concealing property, or o	declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both.
/s/	Cynthia Wade	_	
	nthia Wade nature of Debtor 1	Signature of Debtor 2	
Dat	e _May 16, 2017	Date	
Did :	-	ent of Financial Affairs for Individuals Filin	ng for Bankruptcy (Official Form 107)?
■ N	you pay or agree to pay someone who is no o es. Name of Person . Attach the <i>Bankru</i>		•
		, , , , , , , , , , , , , , , , , , , ,	,

United States Bankruptcy Court Eastern District of Michigan

In re	Cynthia Wade		Case No.	
		Debtor(s)	Chapter	7

STATEMENT OF ATTORNEY FOR DEBTOR(S) PURSUANT TO F.R.BANKR.P. 2016(b)

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

- 1. The undersigned is the attorney for the Debtor(s) in this case.
- 2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]
 - [X] FLAT FEE For legal services rendered in contemplation of and in connection with this case, A. 555.00 555.00 В. C. 0.00 [] RETAINER A. The undersigned shall bill against the retainer at an hourly rate of \$. [Or attach firm hourly rate schedule.] Debtor(s) have В. agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
- 3. \$ 0.00 of the filing fee has been paid.
- 4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
 - A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - D. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
 - E. Reaffirmations;
 - F. Redemptions;
 - G. Other:
- 5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Fee does not include representation in any motions whatsoever including, but not limited to, motions to reopen cases, automatic stay motions, motions for turnover, and any other type of motion. It also does not include representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceedings, or attendance of 2004 exams.

This fee does NOT include any out of pocket expenses that were paid on behalf of Debtor(s).

It also does not represent any credit reports, or credit counseling certificates; we charge \$75 to single and \$125 to joint debtors to pull credit report(s), Credit Counseling pre-filing certificate(s), and post filing education course(s).

This fee also does NOT include any work relative to reaffirmation or lease assumption agreements; Debtor will pay an extra \$95 after the case is filed for any such agreements that they want us to review and fill out for them, and then mail out to the creditor.

Also not included in this fee is the Firm's effort to retrieve any monies that may have been garnished from the debtor. For that, the law firm charges a contingency fee of 50% of whatever funds are retrieved. In return, Firm agrees to make whatever effort necessary to retrieve those funds including, but not limited to, contacting creditor, sending demand letter, and filing an adversary proceeding against the creditor if they delay return of such funds.

The firm also charges an additional \$ 150.00 per adjourned 341 hearing.

6.	The source of	of payments to	the undersigne	d was f	trom:					
	Α.	ΧΧ̈́	Debtor(s)' ear			compensation	for serv	ices p	erforme	d

	В.	Other (describe, including the identity of pay	or)
7.	_	not shared or agreed to share, with any other person pensation paid or to be paid except as follows:	, other than with members of the undersigned's law firm or
Dated:	May 16, 2017		/s/ Terrance A. Hiller
			Attorney for the Debtor(s) Terrance A. Hiller P55699 Jaafar Law Group PLLC 23400 Michigan Ave Suite 110A Dearborn, MI 48124 888-324-7629
Agreed:	/s/ Cynthia Wade	<u> </u>	
	Cynthia Wade		
	Debtor		Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

In re	Cynthia Wade		Case No.				
		Debtor(s)	Chapter 7				
	VERIFICATION OF CREDITOR MATRIX						
Γhe ab	ove-named Debtor hereby verifi	ies that the attached list of creditors is true and c	orrect to the best of his/her knowledge.				
Date:	May 16, 2017	/s/ Cynthia Wade					
		Cynthia Wade					
		Signature of Debtor					

Barclays Bank Delaware Po Box 8803 Wilmington, DE 19899

Capital One 15000 Capital One Dr Richmond, VA 23238

Carlyle PO, LLC d/b/a Carlyle Tower Apts c/o Carolyn R. Cohen, Esq. 4230 Orchard Lake Rd. Orchard Lake, MI 48323

Cbna Po Box 6497 Sioux Falls, SD 57117

Christian Financial Cr 18441 Utica Rd Roseville, MI 48066

CT Owner A-1 LLC 23300 Providence Dr, Suite 101 Southfield, MI 48075

Frd Motor Cr Pob 542000 Omaha, NE 68154

I C System Inc Po Box 64378 Saint Paul, MN 55164

Stefany L. Freeman 2550 S.Telegraph Rd. Suite 200 Bloomfield Hills, MI 48302

Syncb/amazon Po Box 965015 Orlando, FL 32896

Syncb/care Credit C/o Po Box 965036 Orlando, FL 32896 Td Bank Usa/targetcred Po Box 673 Minneapolis, MN 55440